MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	10/562396

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51		/				
2								52		/				
3								53		/				
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46		/						96						
47		/						97						
48		/						98						
49		/						99						
50		/						100						
TOTAL IND.	↓		↓		↓			TOTAL IND.	3	↓		↓		↓	
TOTAL DEP.	←		←		←			TOTAL DEP.	33	←		←		←	
TOTAL CLAIMS								TOTAL CLAIMS	36						

PTO - 1360 (REV. 11/84)

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